

Background Information:

In 2012, Washington State experienced an epidemic of pertussis (whooping cough). There were 4,918 cases in 2012 compared to 962 in 2011. The highest incidence was in babies less than one year of age.

To help protect infants, Tdap vaccine is now recommended at each pregnancy. The ACIP voted for the updated recommendation in October 2012.

In 2014, there have been at least 27 confirmed cases of measles in Washington State. While the MMR (measles, mumps, rubella) vaccine is NOT recommended during pregnancy, it can be postpartum, even if the mother is breastfeeding.

Pregnant patients should also be encouraged to make sure their other children are up-to-date on all recommended immunizations.

Healthcare providers continue to be the most trusted source of information for their patients. Pregnancy is a good time to educate their patients about adult and childhood vaccines.

Maternal Immunizations

Vaccine recommendations during and after pregnancy

A mother's immunity is passed along to her baby during pregnancy that will help protect the baby from diseases such as flu and pertussis. It's also safe for a woman to receive routine vaccines right after giving birth, even if she is breastfeeding.

Prenatal Vaccine Recommendations

Influenza (Flu) Vaccine

Due to the increased risk of flu related complications among pregnant women, Trivalent Inactivated Influenza Vaccine (IIV3) is recommended for all pregnant and postpartum women.

The vaccine can be given any time during pregnancy or postpartum. Getting vaccinated during pregnancy protects the mother and her from the flu.

Tdap (Tetanus, diphtheria, pertussis) Vaccine

In order to help protect newborns from pertussis, pregnant women should get a **single dose of Tdap vaccine at each pregnancy**.

The vaccine **should be given during the third trimester** (between 27 and 36 weeks gestation) in order to have the highest concentration of antibodies in the baby at the time of birth.

If not administered during pregnancy, Tdap should be given immediately postpartum.

To ensure protection against maternal and neonatal tetanus, pregnant women who have never been vaccinated against tetanus **should get three vaccines containing tetanus**.

Tdap should be given as the first dose, during the third trimester. Two doses of Td should be given after Tdap.

Hepatitis B

Pregnant women identified as being at risk of acquiring hepatitis B infection should be vaccinated. Limited evidence does not suggest any fetal harm from the vaccine.

Postpartum Vaccine Recommendations

Influenza (Flu) Vaccine

Women should receive flu vaccine before they leave the hospital if they have not been vaccinated during pregnancy.

Contraindications to vaccination:

- Vaccines should not be given to those who had an anaphylactic reaction to a previous dose of vaccine or components of the vaccine to be given
- Live vaccines should not be given pregnant women due to theoretical risk of transmission of vaccine virus to the fetus

Breastfeeding:

Breastfeeding is not a contraindication to vaccination except for yellow fever and smallpox vaccines. There is no evidence of risk affecting the safety of breastfeeding for women or their infants. This includes live virus vaccines.



For persons with disabilities this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY 711).

Postpartum Vaccine Recommendations Continued...

MMR (measles, mumps, rubella) Vaccine

Women born on or after January 1, 1957, without evidence of immunity to rubella should get one dose of MMR vaccine before leaving the hospital.

Tdap (tetanus, diphtheria, pertussis) Vaccine

Women who have not previously received a dose of Tdap should receive a dose before they leave the hospital, even if they received Td booster.

Varicella (chickenpox) Vaccine

Women without evidence of immunity to varicella should be vaccinated with the first dose before they leave the hospital. Follow up with the second dose at the 6-8 week office visit.

HPV (human papillomavirus) Vaccine

Women under 27 years of age who have not completed a primary series should receive three doses at the correct intervals. If the HPV series was started prior to pregnancy, it can be completed postpartum. There is no need to restart the series over.

Resources:

- CDC guidelines for vaccinating pregnant and breastfeeding women: http://www.cdc.gov/VACCINes/pubs/preg-guide.htm
- CDC Pink Book: <u>www.cdc.gov/vaccines/pubs/pinkbook/index.html</u>
- ACOG-Update on Immunization and pregnancy; Tetanus, Diphtheria, and Pertussis Vaccination:
 - https://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Obstetric-Practice/Update-on-Immunization-and-Pregnancy-Tetanus-Diphtheria-and-Pertussis-Vaccination
- Send an email to an immunization nurse: immunenurses@doh.wa.gov
- Immunization Action Coalition: www.immunize.org